

Fiscal Year 2012 Highlights

Fiscal Year period covers
October 1, 2011 to September 30, 2012

Application Cycle:

September 1 - November 15, 2011







NIH Institutes and Centers*

Institutes

National Cancer Institute (NCI)

National Eye Institute (NEI)

National Heart, Lung, and Blood Institute (NHLBI)

National Human Genome Research Institute (NHGRI)

National Institute on Aging (NIA)

National Institute on Alcohol Abuse and Alcoholism (NIAAA)

National Institute of Allergy and Infectious Diseases (NIAID)

National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS)

National Institute of Biomedical Imaging and Bioengineering (NIBIB)

National Institute of Child Health and Human Development (NICHD)

National Institute on Deafness and Other Communication Disorders (NIDCD)

National Institute of Dental and Craniofacial Research (NIDCR)

National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK)

National Institute on Drug Abuse (NIDA)

National Institute of Environmental Health Sciences (NIEHS)

National Institute of General Medical Sciences (NIGMS)

National Institute of Mental Health (NIMH)

National Institute on Minority Health and Health Disparities (NIMHD)

National Institute of Neurological Disorders and Stroke (NINDS)

National Institute of Nursing Research (NINR)

Centers

John E. Fogarty International Center (FIC)

National Center for Complementary and Alternative Medicine (NCCAM)

National Center for Advancing Translational Sciences (NCATS)

^{*} Participating in the Extramural Loan Repayment Programs



NIH Extramural Loan Repayment Programs FY 2012

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The Year in Review

In Fiscal Year (FY) 2012, 3,100 individuals applied to the five Extramural Loan Repayment Programs (LRPs): Clinical Research, Pediatric Research, Health Disparities Research, Clinical Research for Individuals from Disadvantaged Backgrounds, and Contraception and Infertility Research. Of those applicants, 1,554 were awarded contracts totaling \$70,707,940. The combined (new and renewal applicants) success rate for the Extramural LRPs was 50 percent.

The Extramural Clinical Research LRP received 54 percent (1,685) of all applications.

New applicants (those not previously funded) constituted 59 percent of all applications while renewal applicants (those previously funded) comprised 41 percent of all applicants. Success rates for new and renewal applicants were 38 and 67 percent, respectively.

The LRPs are open to health professionals with doctoral level degrees and varying levels of experience. Most new FY 2012 awardees are beginning their careers, with 56 percent having received their qualifying degrees within the last 5 years and 93.6 percent within the past 10 years.

Physician doctorates (including dual physician doctorates and academic doctorates, for example, MD/PhD degrees) comprised 52 percent of the 1,554 awards, while those with academic doctoral level degrees comprised 46 percent of the total awards.

Seventy-six percent of the new awardees had educational debt greater than \$50,000, with 9 percent having debt levels greater than \$200,000.

Women received 806 of the 1,554 LRP awards. Black/African American applicants received 105 awards. Asian Americans received 187 awards. Hispanic Americans received 94 awards. American Indians/Alaska Natives were recipients of 10 awards.

The Division of Loan Repayment offers multiple resources for applicants. These include an interactive step-by-step application guide and two webinars, An Overview of the Loan Repayment Programs and Application Tutorial. The webinars summarize the programs, give tips for applying and show applicants how to avoid common pitfalls. The LRP web site www.lrp.nih.gov contains links for the application guide and webinars.







The Five Extramural Loan Repayment Programs

Clinical Research LRP:

Clinical research is patient-oriented clinical research conducted with human subjects, or research on the causes and consequences of disease in human populations involving material of human origin (such as tissue specimens and cognitive phenomena) for which an investigator or colleague directly interacts with human subjects in an outpatient or inpatient setting to clarify a problem in human physiology, pathophysiology or disease, or epidemiologic or behavioral studies, outcomes research or health services research, or developing new technologies, therapeutic interventions, or clinical trials.

Pediatric Research LRP:

Qualified Pediatric Research is defined as research directly related to diseases, disorders, and other conditions in children.

Health Disparities Research LRP:

The scope of research qualified for this program includes basic research, clinical research or behavioral research directly related to health disparity populations and the medically underserved. Group is defined as a health disparity population: if there is a significant disparity in the overall rate of disease incidence, prevalence, morbidity, mortality, or survival rates in the population as compared to the health status of the general population.

Clinical Research for Individuals from Disadvantaged Backgrounds LRP:

For this program, an individual from a disadvantaged background is defined according to low family income levels set by the U.S. Bureau of the Census – as published in the Federal Register.

To meet this low-income requirement candidates must demonstrate their disadvantaged status by submitting (1) a written statement from former school(s) where he/she qualified for Federal disadvantaged assistance. (2) verification of receipt of loans from either the Health Professions Student Loans (HPSL) or Loans for Disadvantaged Student Program, or (3) verification of a scholarship from the U.S. Department of Health and Human Services under the Scholarship for Individuals with Exceptional Financial Need.

Contraception and Infertility Research LRP:

Contraception research is defined as research whose ultimate goal is to provide new or improved methods of preventing pregnancy. Infertility research is defined as research whose long-range objective is to evaluate, treat, or ameliorate conditions which result in the failure of couples to either conceive or bear young.



Applications, Awards, and Success Rates New and Renewal by Program

NIH received 3,100 applications

- 59 percent of the applications were from new applicants
- 50 percent of all applicants were awarded

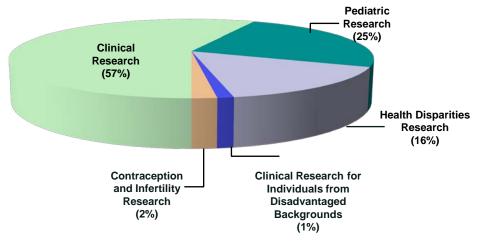
LRP	New		Renewal			Total			
2	Applications	Awards	Success Rate	Applications	Awards	Success Rate	Applications	Awards	Success Rate
Clinical Research	959	389	41%	726	493	68%	1,685	882	52%
Pediatric Research	467	168	36%	290	214	74%	757	382	50%
Health Disparities Research	338	122	36%	215	120	56%	553	242	44%
Clinical Research for Individuals from Disadvantaged Backgrounds	23	9	39%	11	10	91%	34	19	56%
Contraception and Infertility Research	48	18	38%	23	11	48%	71	29	41%
Total	1,835	706	38%	1,265	848	67%	3,100	1,554	50%

Funding

New and Renewal by Program

LRP	New		Rer	newal	Total	
LIXI	Awards	Funding	Awards	Funding	Awards	Funding
Clinical Research	389	\$23,339,153	493	\$16,225,451	882	\$39,564,604
Pediatric Research	168	\$11,560,880	214	\$7,480,483	382	\$19,041,363
Health Disparities Research	122	\$6,108,530	120	\$3,826,946	242	\$9,935,476
Clinical Research for Individuals from Disadvantaged Backgrounds	9	\$624,407	10	\$256,179	19	\$880,586
Contraception and Infertility Research	18	\$996,637	11	\$289,275	29	\$1,285,912
Total	706	\$42,629,607	848	\$28,078,334	1,554	\$70,707,941

Percent of Total Awards by LRP





Funding by NIH Institutes and Centers

New Awards

IC	Awards	Funding
NIMHD	131	\$6,732,937
NCI	103	\$6,644,702
NHLBI	76	\$5,437,310
NICHD	61	\$3,484,145
NIMH	50	\$2,759,958
NIAID	47	\$3,069,839
NIDA	37	\$1,991,030
NIDDK	35	\$2,370,907
NINDS	31	\$1,944,053
NIA	30	\$1,759,716
NCATS	19	\$1,227,532
NIAAA	17	\$932,426
NEI	14	\$786,574
NIAMS	13	\$931,677
NIGMS	9	\$701,871
NIDCD	8	\$407,606

IC	Awards	Funding
NIEHS	8	\$356,520
NCCAM	7	\$400,954
NIDCR	4	\$265,441
NHGRI	3	\$270,117
NIBIB	2	\$126,986
NINR	1	\$27,306
Total	706	\$42,629,607

22 Institutes and Centers funded at least one new LRP contract in FY 2012



Funding by NIH Institutes and Centers

Renewal Awards

IC	Awards	Funding
NIMHD	130	\$4,083,124
NCI	124	\$3,577,158
NHLBI	91	\$3,696,421
NICHD	73	\$2,610,328
NIAID	71	\$2,886,609
NIDA	68	\$1,512,467
NIMH	61	\$1,913,671
NCATS	40	\$1,560,312
NIDDK	39	\$1,626,698
NINDS	31	\$1,130,348
NIAAA	27	\$614,424
NEI	20	\$712,588
NIAMS	19	\$803,875
NIA	18	\$490,178

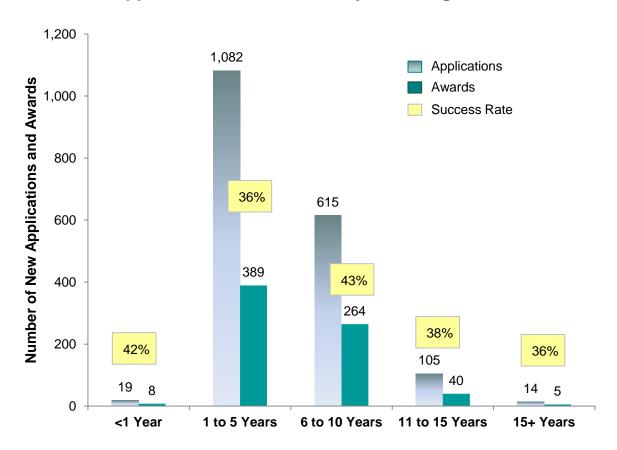
IC	Awards	Funding
NIDCD	13	\$203,595
NIDCR	12	\$408,746
NIEHS	9	\$226,064
NINR	1	\$14,298
NIBIB	1	\$7,430
Total	848	\$28,078,334

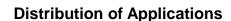
19 Institutes and Centers funded at least one renewal LRP contract in FY 2012



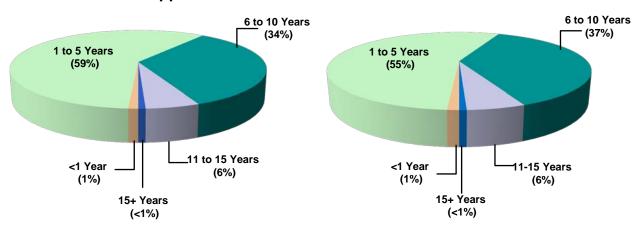
Applications, Awards, and Success Rates

New Applicants and Awardees by Post-Degree Years





Distribution of Awards



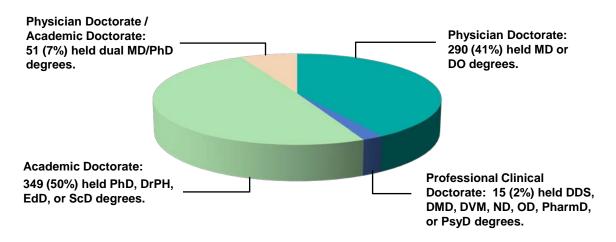


LRP Awards by Doctoral Degree

New Awards

LRP	Physician Doctorate	Professional Clinical Doctorate	Academic Doctorate	Physician Doctorate / Academic Doctorate	Total
Clinical Research	172	9	172	36	389
Pediatric Research	82	4	69	13	168
Health Disparities Research	22	2	97	1	122
Clinical Research for Individuals from Disadvantaged Backgrounds	6	0	3	0	9
Contraception and Infertility Research	8	0	8	1	17*
Total	290	15	349	51	705

Distribution of New Awards by Degree



^{*}Does not include 1 Contraception and Infertility Awardee who did not have a doctoral level degree.

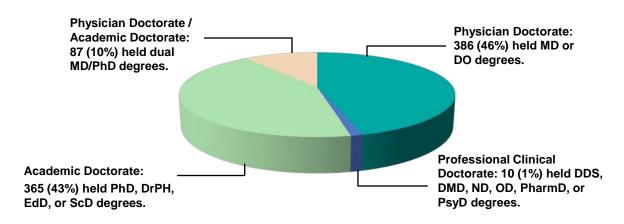


LRP Awards by Doctoral Degree

Renewal Awards

LRP	Physician Doctorate	Professional Clinical Doctorate	Academic Doctorate	Physician Doctorate / Academic Doctorate	Total
Clinical Research	238	7	197	51	493
Pediatric Research	113	2	68	31	214
Health Disparities Research	24	1	92	3	120
Clinical Research for Individuals from Disadvantaged Backgrounds	6	0	3	1	10
Contraception and Infertility Research	5	0	5	1	11
Total	386	10	365	87	848

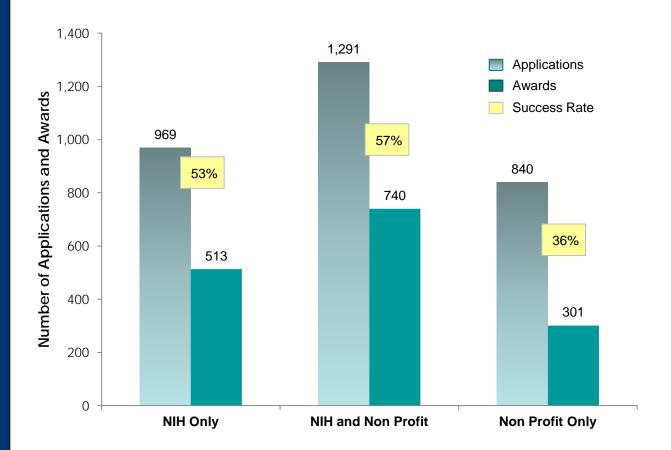
Distribution of Renewal Awards by Degree





Applications, Awards, and Success Rates

New and Renewal by Source of Research Funding





Educational Debt Levels of LRP Awardees

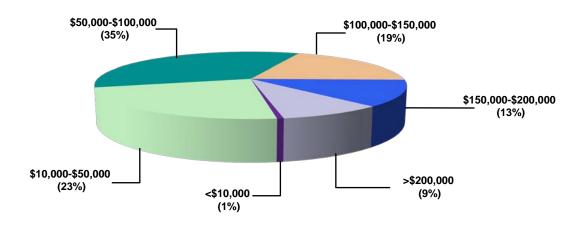
New Awards

Seventy-six percent of new FY 2012 awardees had educational debt levels in excess of \$50,000

The average debt was \$101,293

Debt Range	Number of Awardees
Less than \$10,000	4
\$10,000 - \$50,000	166
\$50,000 - \$100,000	247
\$100,000 - \$150,000	136
\$150,000 - \$200,000	89
\$200,000 and over	64
Total	706

Distribution of Awards by Debt Level



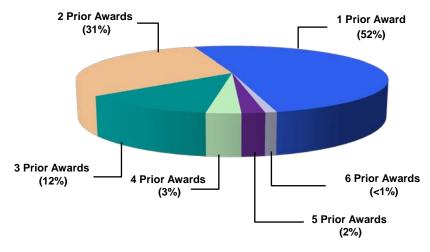


Number of Prior Awards Received

Renewal Awards

LRP	1 Prior Award	2 Prior Awards	3 Prior Awards	4 Prior Awards	5 Prior Awards	6 Prior Awards	Total
Clinical Research	248	152	65	19	7	2	493
Pediatric Research	106	62	32	7	6	1	214
Health Disparities Research	70	42	8	0	0	0	120
Clinical Research for Individuals from Disadvantaged Backgrounds	5	4	0	0	1	0	10
Contraception and Infertility Research	7	4	0	0	0	0	11
Total	436	264	105	26	14	3	848

Number of Prior Awards Received by 2012 Renewal Awardees





Applications, Awards, and Success Rates New and Renewal by Gender

Male Applicants **Female Applicants Gender Distribution LRP** Success Success **Applications Awards Applications Awards** Male Female Rate Rate **Awardees Awardees** Clinical Research 822 449 808 403 53% 47% 55% 50% Pediatric Research 324 176 419 199 47% 53% 54% 47% **Health Disparities** 137 68 50% 403 168 42% 29% 71% Research Clinical Research for Individuals from 11 55% 23 13 57% 32% 68% 6 Disadvantaged Backgrounds Contraception and 14 4 29% 55 23 42% 15% 85% Infertility Research Total* 703 54% 1,708 47% 47% 53% 1,308 806

^{*}Does not include applicants (84) and awardees (45) who did not state their gender.



Awardee Demographics

New and Renewal by Ethnicity

LRP	Awards	Hispanic or Latino	Not Hispanic or Latino
Clinical Research	882	41 (5%)	841 (95%)
Pediatric Research	382	15 (4%)	367 (96%)
Health Disparities Research	242	29 (12%)	213 (88%)
Clinical Research for Individuals from Disadvantaged Backgrounds	19	7 (37%)	12 (63%)
Contraception and Infertility Research	29	*	*
Total	1,554	94	1,460
Percent of Awards		6%	94%

^{*}Restricted Data - small-sized datasets cannot be distributed due to participant confidentiality considerations



Awardee Demographics

New and Renewal by Race

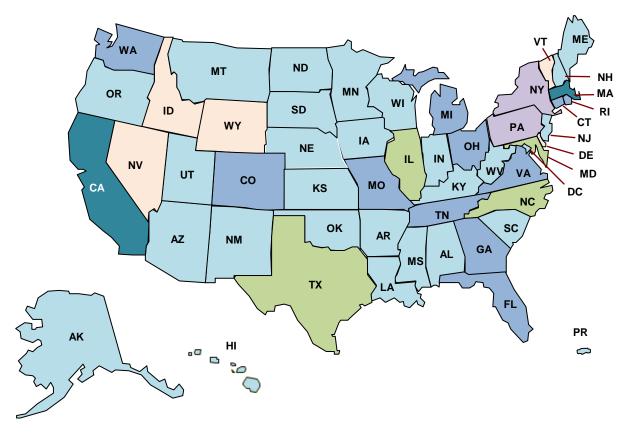
LRP	Awards	American Indian or Alaska Native	Black or African- American	Asian	Native Hawaiian or Other Pacific Islander	White	More Than One Race	Other / No Response
Clinical Research	882	*	23 (3%)	115 (13%)	*	644 (73%)	16 (2%)	82 (9%)
Pediatric Research	382	*	10 (3%)	40 (10%)	*	293 (77%)	12 (3%)	24 (6%)
Health Disparities Research	242	*	67 (28%)	27 (11%)	*	104 (43%)	13 (5%)	27 (11%)
Clinical Research for Individuals from Disadvantaged Backgrounds	19	*	*	*	*	*	*	*
Contraception and Infertility Research	29	*	*	*	*	19 (66%)	*	*
Total	1,554	10	105	187	1	1,065	45	141
Percent of Awards		1%	7%	12%	0%	68%	3%	9%

^{*}Restricted Data - small-sized datasets cannot be distributed due to participant confidentiality considerations

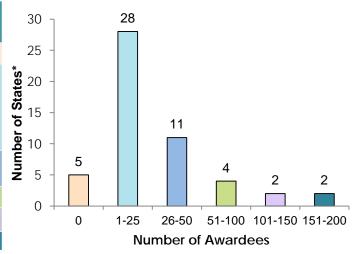


Number of Awardees by State

New and Renewal*



Number of Awardees	States			
0	DE, ID, NV, VT, WY			
1-25	AL, AK, AZ, AR, DC, HI, IN, IA, KS, KY, LA, ME, MN, MS, MT, NE, NH, NJ, NM, ND, OK, OR, PR, SC, SD, UT, WV, WI			
26-50	CO, CT, FL, GA, MI, MO, OH, RI, TN, VA, WA			
51-100	IL, MD, NC, TX			
101-150	NY, PA			
151-200	CA, MA			



^{*} Does not include 2 awardees who work outside of the United States



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Role of the NRSA Payback Service Center

The National Research Service Award (NRSA) Payback Service Center (PSC) is responsible for monitoring and processing the payback obligation of individuals who received appointments to NIH Institutes and Centers (ICs) training grants and fellowships under the Ruth L. Kirschstein National Research Service Award.

The NRSA PSC provides this service to all NIH ICs that award training grants and fellowships. If an individual incurs a payback obligation, the awarding NIH IC sends the trainee/fellow file to the PSC. The PSC ensures that the trainee/fellow honors their payback obligation. It is important to remember that the original Payback Agreement must always be forwarded to the NRSA PSC. While copies of all other documents are acceptable, in the event NIH pursues financial payback collection for any NRSA recipient, the Payback Agreement with the original signature is a key document required for that process.

The NRSA legislation requires postdoctoral recipients of support to repay the U.S. Government by engaging in health-related biomedical or behavioral research for a length of time equal to the period of NRSA support received up to 12 months. This requirement includes direct administration or review of health-related research, health-related teaching, or any combination of these activities. Postdoctoral trainees and fellows are required to start acceptable payback activities within two years of their award termination. Postdoctoral trainees and fellows who do not engage in payback service can elect to repay their debt financially. The NRSA PSC handles requests for extensions of time to initiate payback service, as well as payback deferrals and waivers, which are granted under certain situations and circumstances.

Postdoctoral NRSA recipients with an outstanding payback obligation are required to file a Ruth L. Kirschstein Annual Payback Activities Certification (APAC) form (PHS 6031-1) with the NRSA PSC until their payback obligation is fulfilled. A letter with a link to the APAC form is mailed to participants on the anniversary date of their award termination. Each recipient must complete this form to indicate their payback status and report any payback service completed. Upon completion of their payback service, a letter is mailed to the trainee to acknowledge fulfillment of their NRSA obligation.



The Year in Review

In Fiscal Year (FY) 2012, the NRSA PSC, with the assistance of support contract staff, completed the development and launched a SharePoint Site (SPS) to help automate work processes and track workload derived from the payback obligation of trainees/fellows who received NRSA awards from 21 different ICs and the Agency for Healthcare Research and Quality. Through a tremendous amount of effort and collaboration with the LRP staff, we reviewed, scanned and uploaded over 4,700 active trainee records into SPS. Once it was fully deployed, SPS improved our ability to track trainee-related documentation, project workload and generate management reports. In addition, we switched from portfolio to functional management of case files to allow NRSA specialists to handle any incoming case and to allow management the flexibility of assigning and reassigning staff based on the workload demands of three specific functions: verification, correspondence, and certification.

The NRSA PSC continued to engage a process recently implemented in FY11 that calls for awarding ICs to send applicable documents to the NRSA PSC as soon as the awarding ICs accept an electronic appointment for a new postdoctoral trainee via xTrain or as soon as the postdoctoral Fellowship is activated, regardless if a payback obligation is anticipated. Awarding ICs coordinated with the NRSA PSC to send Payback Agreement Forms, Activation Notices, and/or Permanent Residency documentation via NIH interoffice mail by batch on a monthly basis along with a standard manifest listing any documents sent and indicating whether a trainee/fellow received prior support via another IC. The NRSA PSC interacted with the awarding ICs via email to confirm that all listed documents were received or to advise them of any missing documents. When applicable documents were not timely submitted, the NRSA PSC contacted the appropriate IC representative to request those documents using our document request escalation procedures.

The sum of all the efforts listed above resulted in the NRSA PSC issuing 3,530 payback notification letters and closing 2,008 files of trainees/fellows who fulfilled their NRSA payback obligation. We forwarded 176 files to the Office of Financial Management to evaluate medical/financial waivers and/or to initiate financial payback due to trainees/fellows becoming unresponsive to letters sent by the NRSA PSC or electing to fulfill their payback obligation via financial means. We also sent 65 files to the Program Support Center to manage debt collections. Lastly, we identified 1,933 closed files from a prior fiscal year that will be transferred in FY13 to the Federal Record Center for storage/disposal.





Notes

Division of Loan Repayment
Office of Extramural Programs
Office of Extramural Research
Office of the Director
National Institutes of Health
Department of Health and Human Services

Web sites:

Loan Repayment Programs (LRP)
http://www.lrp.nih.gov
National Research Service Award (NRSA)
http://grants.nih.gov/training/nrsa.htm





